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**STATE OF MONTANA**  
**BULLETIN**  
OF THE  
**Department of Public Health**

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No. 2

**Montana State Board of Health**

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**HELENA, MONTANA**

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RESULT OF ONE YEAR'S REGISTRATION OF  
DEATHS.

	SMALLPOX	DIPHTHERIA	SCARLATINA	TYPHOID FEVER	TUBERCULOSIS
	Total Deaths...	% Mortality...	Total Deaths...	% Mortality...	% Mortality...
Beaverhead .....	141	2	14	66	4
Broadwater .....	2	5	1	20	11
Carbon .....	33	14	42	2	119
Cascade .....	8	72	19	26	97
Choteau .....	39	9	2	22	7
Custer .....	8	57	4	7	49
Dawson .....	4	22	2	10	12
Deer Lodge .....	3	33	1	3	44
Fergus .....	12	13	2	15	13
Flathead .....	40	121	12	10	17
Gallatin .....	62	16	2	12	163
Granite .....	6	7	1	14	1
Jefferson .....	7	62	7	11	5
Lewis and Clark .....	19	39	8	20	39
Madison .....		8		37	3
Meagher .....	2	6		16	8
Missoula .....	155	103	15	14	73
Park .....	7	69	3	4	17
Powell .....	3	20	1	5	1
Ravalli .....	35	19	1	5	33
Rosebud .....	3	19	5	26	4
Sanders .....	12	43	3	7	6
Silver Bow .....	56	361	42	12	257
Sweetgrass .....		14	1	7	1
Teton .....	3				3
Valley .....	5	20	2	10	9
Yellowstone .....	10	82	15	18	96
<b>TOTALS .....</b>	<b>504</b>	*	<b>1367</b>	<b>165</b>	<b>13</b>
			980	53	5
			957	138	14
				289	4185
					7

\* There were no deaths from Smallpox.

It is not a usual thing for people to read a tabulated statement with any degree of interest, but I wish that every citizen of this state would read and understand the full meaning of the foregoing table, for if ever a sermon was preached by an inanimate object this table is such an object. It is full of meaning and teaches a lesson that should go straight to the heart of every man and of every mother in this state.

The first two columns show that during the year there were reported 504 cases of small-pox and yet there was not a single death from this disease. How does this happen? Less than 100 years ago the death rates from smallpox was very high and why is it not equally high to-day? Simply because the energetic fight made against this disease during the last 100 years has so reduced the virulence of the virus that the disease is no longer the death dealing plague it was. The virus is so overcome by the constant fight made against it that when the disease first appears in a community it is almost impossible to recognize it. But let the first few cases go unrecognized and let the virus gain strength by passing through three or four systems and what is the result? Simply well marked cases of smallpox. This is the experience in every instance in which the disease has appeared in this state. But smallpox can and should be absolutely prevented. Vaccination, such a simple procedure, will do this.

The result of a concerted fight against small pox teaches us that an equally concerted fight against other communicable diseases will give the same result. But what are the conditions? Let us glance at the evidence presented under diphtheria. We find that during the year 1267 case of this disease were reported in this State and that there were 165 deaths or a mortality of 13 per cent from this disease. We note that in several counties the death rate from this disease was much above 13 per cent. Statistics show that when antitoxin is used within the first 48 hours of the disease the death rate is only 1.6 per cent, hence it is evident that the antitoxin is not promptly used in our State. Why is this? In some instances it is because the physician is not called in time, while in few instances no physician is called at all and not only is the life of the individual lost by such neglect, but many others are exposed to this disease by the negligence on the part of those

who refused to call the physician and who knowing, or at least having good reason to suspect the nature of the disease, failed to report it to the health officer. But there is another reason why antitoxin, that wonderful remedy that has reduced the death rate from diphtheria from 35 to 50 per cent to 1.6 per cent, is not promptly used. This reason is the fact that the remedy is expensive and with the poor and even the moderately well-fixed familis, its use is a matter of expense that must be avoided if possible, hence its use is postponed until the last moment, when it is too late to give the desired results. When purchased in large quantities by the State the remedy is comparatively inexpensive and in a great many of our states to day it is supplied free of charge to the citizens of the state. This is done not only because of the number of lives saved by its prompt use, but from the fact that a small dose given to those who are exposed to the disease will prevent the disease. Our State furnishes the "Black-leg Vaccine" free of charge to the cattle men of our State, but we cannot afford to furnish antitoxin free to the people. Is this because the cattle of our State are of so much more value than the people? But the fight is not only one to save life by the administration of a valuable remedy, but it is a fight to prevent the disease. This is accomplished in part by the administration of preventative doses of antitoxin and in part by quarantine measures. When a case of smallpox appears, quarantine measures are strictly enforced, a measure possible only by the sympathetic help of the people. If the people will render the same assistance in preventing the spread of diphthria that they do in preventing the spread of smallpox, deaths from diphtheria will be as rare as they are from smallpox.

Now let us look at the next—scarlet fever. How often we hear a mother say "I wish my children would get scarlet fever and be done with it." Poor deluded mothers. When they make such a wish they do ont realize that five out of every hundred persons suffering from scarlet fever in this State die, and that when they wish their children could have scarlet fever and be done with it they are in reality wishing that the children might have scarlet fever in order that they, the mothers, may be done with the children forever.

Now look at typhoid fever; 957 cases reported with 138

deaths, a mortality of 14 per cent. Did I hear someone say that typhoid fever was not a fatal disease in Montana? Well, the average death rate from typhoid fever in Ohio, Illinois, Indiana, etc. is only 10 per cent. Do we hear someone say, "These figures are not accurate because all the cases are not reported". Is it a physician that makes such an assertion? Then ask him "Doctor, do you mean that you do not report your cases?" Then he will tell you "Oh, no, I report mine, but S. doesn't report his". Draw your own conclusions regarding such statements. But typhoid fever can be prevented. It is a disease caused by filth and yet we find that some newspaper editors object to the law that prevents polluting the water of our State because such law will cause some expense to the cities. What kind of financing is this? We object to spending a little money to disinfect our sewage now, when we know that if we continue to put sewage into our streams it will be a matter of only a few years before we must spend a great deal more money in installing water purification plants ,and in the mean time our people will continue to die as a result of the pollution now going on. We prohibit mills putting sawdust into the streams because it kills the fish, but "kick" if it is suggested that we quit putting sewage into the stream because it kills the people. Yes, the fish are valuable, but the people are worth nothing.

And the "Great White Plague"; what about it? We find that it caused 7 per cent of all the deaths in our state last year. It causes 10 per cent of all the deaths in the older states. Our state is sparsely settled at present. With a death rate of 7 per cent under present conditions what must we expect when we become thickly populated? Nearly every state has started a determined fight against this disease. Within a month from the time this reaches you the international congress for the prevention of tuberculosis will convene in Washington. There men from all over the world will convene to discuss ways and means for preventing this dread disease. Every state will be represented. Montana will be represented by physicians who are cutting off their income by fighting this and other diseases. These physicians will pay their own way to this convention to learn what? How to prevent your becoming sick from this disease. In the course of the convention these physicians will be

asked "What is your state doing to prevent this disease" and the reply must be "Nothing."

Some months ago a paper published in this State gave an editorial in which the question "Why are more communicable diseases reported from this locality than from others?" was asked and "Answered". It was stated that the various physicians had been consulted and the reason was that the physicians of that locality reported their cases and others did not. Now we trust that the same editor will go to the physicians again and ask why, if the former conclusion be true, does that county show a mortality in every instance higher than the average? Mr. Editor, the diseases are there alright, they are not reported any more thoroughly in your own town than in others, and the causes for the disease are there, and you can find them if you will take a walk or drive over your town and will keep your olfactory organ working and will put on your glasses so that you can see the conditions. They are there, open your eyes and see them. Some other editors might take such a trip with profit to there communities and if they will spend their wits and ink in persuading their people to support the health officer in his efforts to secure a sanitary condition in the town they will do more good for their people than they will by trying to show that their people are a little better than some others. We realize that they must be because "The good die young."

Finally, we find that 645 people died last year in our state from diseases that are preventable. Do you say "Most of these were young children?" (Poor little baby, too bad that you were not a calf.) But they were not. The records show the deaths by ages and if you are interested you can see them. What a howl would go up over the state if 645 cattle had died in a year from preventable causes. Money would be no object, it would be furnished, the only question would be "Can this be stopped?" If it could or was remotely possible, all the money asked would be produced very promptly. Or, if our deer and other game were being killed by preventable causes as they were before money was provided for their protection (the "Sportsman-hog" was a preventable cause of death), would it be stopped? Our people are dying at the rate of 645 per year from preventable causes. Will we let them continue to die this way or will we furnish the money necessary to carry on the fight against these

preventable diseases? Our answer heretofore has been "We need all the money we have to protect the stock and game, we can't afford to protect the people." We will answer this question again six months hence, what will the answer be this time?

COMMUNICABLE DISEASES REPORTED FOR THE MONTH OF JULY, 1908.

SMALLPOX: Cases of Smallpox were reported as follows; Beaverhead 1; Carbon 3; Cascade 1 (in Great Falls); Fergus 1; Flathead 26; Gallatin 30 (25 in Bozeman); Missoula 2 (1 in Missoula City); Park 1; Ravalli 3; Sanders 1; Silver Bow 2 (both in Butte); Teton 2; total 73; total last month 98; total last July 12.

DIPHTHERIA: Cases of Diphtheria were reported as follows; Carbon 8; Cascade 11 (9 in Great Falls); Chouteau 1; Deer Lodge 5 (4 in Anaconda); Flathead 5; Gallatin 1; Lewis and Clark 2 (both in Helena); Missoula 8 (7 in Missoula City); Park 1 Powell 1; Ravalli 5; Sanders 4; Silver Bow 7 (5 in Butte); Sweetgrass 3; Yellowstone 11 (9 in Billings); total 73; total last month 74; total last July 114.

SCARLATINA: Cases of Scarlet Fever were reported as follows; Cascade 3 (2 in Great Falls); Flathead 3; Lewis and Clark 4 (all in Helena); Madison 1; Missoula 1 (in Missoula City); Park 7 (6 in Livingston); Ravalli 1; Silver Bow 27 (17 in Butte); Yellowstone 1 (in Billings); total 48; total last month 91; total last July 30.

MEASLES: Cases of Measles were reported as follows; Choteau 1; Flathead 1; Silver Bow 1 (in Butte); total 3; total last month 36; total last July 79.

TYPHOID FEVER: Cases of Typhoid Fever were reported as follows; Carbon 2, Cascade 2 (both in Great Falls); Chouteau 1; Custer 4; Dawson 2; Park 1; Powell 1; Silver Bow 3 (all in Butte); Yellowstone 2 (both in Billings); total 18; total last month 18; total last July 37.

## BIRTHS.

Births reported to the State Board of Health of Montana for July 1908, and comparative birth and death rate in State.

**Births reported from Cities of 5,000 or more inhabitants.**

Anaconda . . . . .	20	11	31	15	16	...	Great Falls . . . . .	23	20	43	21	22	...
Billings . . . . .	12	8	20	7	13	...	Helena . . . . .	18	8	26	18	17	...
Bozeman . . . . .	5	7	12	4	8	...	Livingston . . . . .	10	10	20	3	17	...
Butte . . . . .	53	44	97	55	42	...	Missoula . . . . .	8	12	20	12	8	...

## MORTALITY

Deaths Reported to the State Board of Health for the Month of  
July 1908, Arranged According to Counties,

	Totals	All other Causes..	Alcoholism..	Suicide.....	Violence.....	Acute Intestinal Diseases.....	Malignant Tumors	Organic Heart Disease .....	Nephritis.....	Pneumonia.....	Whooping-Cough..	Meningitis.....	Typhoid Fever...	Measles.....	Scarlet Fever...	Diphtheria.....	Tuberculosis.....
Beaverhead.....																	
Broadwater.....																	
Carbon.....																	
Cascade.....																	
Chouteau.....																	
Custer.....																	
Dawson.....																	
Deer Lodge.....																	
Fergus.....																	
Flathead.....																	
Gallatin.....																	
Granite.....																	
Jefferson.....																	
Lewis and Clark.....																	
Madison.....																	
Meagher.....																	
Missoula.....																	
Park.....																	
Powell.....																	
Ravalli.....																	
Rosebud.....																	
Sanders.....																	
Silver Bow.....	10	2															
Sweet Grass.....																	
Teton.....																	
Valley.....																	
Yellowstone.....																	
Totals.....	39	10	7	2	3	4		16	11	29	8	6	76	6	9	109	335

Deaths per 100,000; 112.1

Annual Death rate per 1,000; 13.45

### **Deaths reported from cities of 5,000 or more inhabitants**

Anaconda . . . . .	2	2	.	.	.	.	.	1	1	1	.	1	2	.	1	4	15
Billings . . . . .	1	.	.	.	.	.	.	.	.	1	.	1	2	.	3	7	.
Bozeman . . . . .	.	.	.	.	.	.	.	.	.	1	.	1	3	.	.	4	.
Butte . . . . .	6	.	2	.	1	1	.	3	1	8	3	.	4	1	2	23	55
Great Falls . . . . .	4	1	.	.	1	.	.	1	1	2	.	4	5	.	6	21	.
Helena . . . . .	2	1	.	.	.	.	.	1	2	1	.	2	2	2	7	18	.
Livingston . . . . .	.	1	1	.	.	.	.	.	1	.	.	.	.	.	3	.	3
Missoula . . . . .	1	.	.	.	.	.	.	.	.	2	.	1	.	1	7	12	.

